Please type a plus sign (+) inside box → [+]

COPY

PTO/SB/01 (12-97)
Approved for use through 9/30/00.OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

☒ Declaration Submitted with Initial Filing OR ☐ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)

Attorney Docket Number	MPT-002
First Named Inventor	Daniel D. McNeil
COMPLETE IF KNOWN	
Application Number	Not Yet Assigned
Filing Date	Not Yet Assigned
Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND SYSTEM FOR PROVIDING AN INTERLEAVED BACKUP

(Title of the Invention)

the specification of which
☒ is attached hereto
OR
☐ was filed on (MM/DD/YYYY) ☐ as United States Application Number or PCT International Application Number ☐ and was amended on (MM/DD/YYYY) ☐ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	NO
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐
			☐	☐	☐

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please Type a plus sign (+) inside this box → [+]

PTO/SB/01 (12-97)
Approved for use through 9/30/00.OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number *(if applicable)*

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 022888 → *Place Customer Number Bar Code Label here*

OR

☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label 022888 *OR* ☐ Correspondence address below

Name	Jeanette S. Harms, Esq.						
Address	Bever, Hoffman & Harms, LLP.						
Address	2099 Gateway Place, Suite 320						
City	San Jose			State	CA	ZIP	95110-1017
Country	U.S.	Telephone	+1 (408) 451-5907			Fax	+1 (408) 451-5908

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ **A petition has been filed for this unsigned inventor**

Given Name (first and middle (if any))	Family Name or Surname
Daniel D.	McNeil

Inventor's Signature	Daniel D. McNeil					Date	10/24/00
Residence: City	Tigard	State	OR	Country	US	Citizenship	US
Post Office Address	16830 SW Bull Mountain Road						
Post Office Address							
City	Tigard	State	OR	ZIP	97224	Country	US

☒ Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:

Please Type a plus sign (+) inside this box → [+]

PTO/SB/02A (3-97)
Approved for use through 9/30/98,OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any)			Family Name or Surname				
Joseph L.			DiMartino				
Inventor's Signature	Joseph L DiMartino					Date	10/24/2000
Residence: City	Beaverton	State	OR	Country	US	Citizenship	US
Post Office Address	12524 SW Sheldrake Way						
Post Office Address							
City	Beaverton	State	OR	ZIP	97007	Country	US

Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any)			Family Name or Surname				
Jaspal			Kohli				
Inventor's Signature	Jaspal Kohli					Date	10/25/00
City	Sunnyvale	State	CA	Country	US	Citizenship	US
Post Office Address	1142 Shenandoah Drive						
Post Office Address							
City	Sunnyvale	State	CA	ZIP	94087	Country	US

Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor						
Given Name (first and middle (if any)			Family Name or Surname				
Inventor's Signature						Date	
City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.